STD. 262 (R	EV. 10/92)	PENSE CLAIM				nt on Rev	nd Privacy erse Side			T	Page	1	of	1
CLAIMANT'S NAME Linda Ulrich						DEPARTME					ENT			
POSITION CB/ID NUMBER						DIVISION OR BUREAU					ngton DC Office			
Director					HEADQUARTERS ADDRESS									
RESIDENCE ADDRESS						TIEADWORK I ERS ADDRESS					TELEPHONE NUMBER			
						CITY				STATE	-		ZIP	
MEALS						L			71	PANIDA				T
MONTH/YEAR		LOCATION			MEACO		INCIDENTALS			CARFARE,			BUSINESS	TOTAL
Mar-09		WHERE EXPENSES	LODGING					COST OF				E CAR USE		
DATE	TIME	WERE INCURRED		BREAKFAST	LUNCH	DINNER		TRANS.	TYPE USED	PARKING	MILES	AMOUNT		FOR DAY
04-Mar		Washington, DC								7.00		0.00		7.00
06-Mar		Washington, DC								8.00		0.00		8.00
11-Mar		Washington, DC								/17.00		0.00		17.00
20-Mar		Washington, DC								8.00		0.00		8.00
24-Mar		Washington, DC								10.00				
										10.00		0.00		10.00
												0.00		0,00
												0.00		0.00
												0.00		0.00
												0.00		0.00
						-						0.00		0.00
												0.00		0.00
												0.00		0.00
												0.00		0.00
		OTALS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00	0	0.00	0.00	
COLUMN	CODE (	ACCTG. USE ONLY	()			CA STATE		被是公司的	16 675	對於				
		TOTAL											\$50	.00
PURPOSE OF TRIP, REMARKS AND DETAILS (Altach receipts when required) travel to and from meetings for the month of March											NORMAL WORK HOURS			
						-				•8 •8	PRIVATE	/EHICLE LI	CENSE NU	JMBER
			elii (1980)							•	MILEAGE	RATE CLAIR	MED	
								W (1875)		•	0.445			
LUEDEBY (	EDTIEV Th	at the above is a true state	ement of the t	ravel expense	es incurred b	v me in accor	dance with D	PA rules in t	he service of		AGENO	Y ACCOL		OFFICE
		owned vehicle was used a									BAID DV	USE C		
		med, and that I have met								. = 10 01	PADE		1/-	7. /
pertaining to	vehicle safe	ety and seat belt usage.			DATE		SIGNATU						4	19
							SIGNATO					ľ	DATE /	,
					4-6	2-09							1/1	4/0
						-							DATE	10-
													/	/